

CRITERIA FOR PRIOR AUTHORIZATION

Intravitreal Injection

PROVIDER GROUP Pharmacy
Professional

MANUAL GUIDELINES The following drug requires prior authorization:
Ranibizumab (Lucentis®)

CRITERIA FOR LUCENTIS Must meet all of the following:

- Patient must be 18 years of age or older
- Patient must have one of the following:
 - Neovascular (wet) age-related macular degeneration (AMD)
 - Macular edema following retinal vein occlusion (RVO)
 - Diabetic macular edema (DME)
- Patient must not have an active ocular or periocular infection
- Must be prescribed by or in consultation with an ophthalmologist

LENGTH OF APPROVAL 12 months